



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

## INFORMATIONAL LETTER NO.1502

**DATE:** May 1, 2015

**TO:** Iowa Medicaid Individual Consumer Directed Attendant Care (I-CDAC) Providers, Targeted Case Managers and Department of Human Services Service (DHS) Workers

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Documents for I-CDAC Enrollment Renewal

**EFFECTIVE:** Immediately

The IME is aware that when Informational Letter 1494 regarding enrollment renewal was mailed to all enrolled individual CDAC providers, not all of the documents may have been inserted into the envelope.

The envelope you received should have included the following documents:

- Informational Letter [No. 1494](#)<sup>1</sup>
- [Iowa Medicaid Provider Agreement General Terms \(470-2965\)](#)<sup>2</sup>: Please sign and date the last page of the agreement.
- [Individual CDAC Disclosure \(470-4612\)](#)<sup>3</sup>: Both pages are to be completed. All applicable boxes are to be checked, questions answered and documentation is to be attached when returning to the IME.

If you have already returned your re-enrollment packet to the IME and the returned packet is missing the signed and dated Provider Agreement or the two pages of the CDAC Disclosure, along with any requested information, the IME will send you a letter requesting that the missing information be returned to the IME so that enrollment renewal may be completed.

The above referenced forms are also found on the DHS website at:

<http://dhs.iowa.gov/ime/providers/forms>.

If you do not have internet access and need the forms mailed to you or have any questions please contact the IME Provider Services Enrollment Unit at 1-800-338-7909 (option 2), or locally in Des Moines at 515-256-4609 (option 2).

<sup>1</sup> [https://dhs.iowa.gov/sites/default/files/1494-Individual\\_CDAC\\_Enrollment\\_Renewal\\_0.pdf](https://dhs.iowa.gov/sites/default/files/1494-Individual_CDAC_Enrollment_Renewal_0.pdf)

<sup>2</sup> [https://dhs.iowa.gov/sites/default/files/470-2965%20Iowa%20Medicaid%20Provider%20Agreement%20General%20Terms\\_1.pdf](https://dhs.iowa.gov/sites/default/files/470-2965%20Iowa%20Medicaid%20Provider%20Agreement%20General%20Terms_1.pdf)

<sup>3</sup> [http://dhs.iowa.gov/sites/default/files/470-4612\\_0.pdf](http://dhs.iowa.gov/sites/default/files/470-4612_0.pdf)